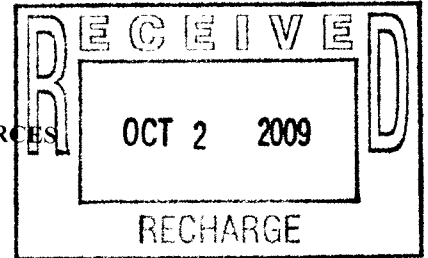


ARIZONA DEPARTMENT OF WATER RESOURCES
Water Management Division
3550 North Central Ave, 2nd Floor
Phoenix, Arizona 85012-2105
Phone (602) 771-8585 Fax (602) 771-8689



**APPLICATION FOR A RECOVERY
WELL PERMIT (§ 45-834.01)**

APPLICATION FEE OF \$ 50.00 PER WELL FOR
THE 1ST 10 WELLS PLUS \$ 10.00 PER WELL
THEREAFTER IS DUE UPON FILING.

PERMIT FEE (SAME AS APPLICATION FEES), PLUS
NOTICE AND PUBLICATION FEES TO BE DETERMINED,
ARE DUE PRIOR TO ISSUANCE OF PERMIT.

PLEASE SUBMIT ONE ORIGINAL AND TWO COPIES OF THE
COMPLETED APPLICATION AND ALL SUPPORTING MATERIALS.

FOR OFFICE USE ONLY	
Application No.:	<u>74-218759</u>
Date Received:	<u>10-2-09</u>

- Name of Applicant: Central Arizona Water Conservation District
Mailing Address 23636 N. 7th Street Phoenix AZ 85024
City State Zip
Contact Person Chuck Cotton Telephone 623 869 2665 Fax 2674
- Name of Active Management Area or Irrigation Non-Expansion Area if applicable, and name of groundwater basin and subbasin where the facility will be located Pinal AMA
- Name of the owner(s) of the land where wellsites are located See attached table
Mailing Address 11
(If more than one owner, attach a list showing corresponding land owner and well registration number(s)).
- Legal description of the land where water will be used Hohokam Irrigation & Drainage District
(quarter/quarter/quarter/section, township and range) Service area
- The recovered water will be used for water uses as part of CAP water deliveries

6. The recovery wells will be used to recover water stored pursuant to Water Storage Permit No. 73-534489.0001
or long-term storage account number. 70-431120

7. Complete the following for each constructed well. If data supplied differs from the ADWR well registry, please submit a change of well information form. Attach supplement if needed.

	Name of Well Owner	Well Registration Number	Location: 1/4, 1/4, 1/4, Section, Township, Range	Design Pump Capacity (GPM)	Hole Depth (Feet)	Casing Diameter (inches)	Proposed Annual Volume (Acre-feet)	Date Well Constructed
①	Sundance Farm	6021808	SE, SW, NW 24, 55, 7E	2000	1525'	20"		1946
②	Barlett	605354	SE, NE, SE, 9 65, 8E	900	700'	16"		1955
③	Martin	800214	SW, NE, NW, 26 55, 7E	300	300'	20"		1946
④	Martin	800215	SW, NE, NW, 26 55, 7E	300	1300'	20"		1957

8. Complete the following for each proposed well to be constructed.

Well Registration Number	Location: 1/4, 1/4, 1/4, Section, Township, Range	Design Pump Capacity (GPM)	Hole Depth (Feet)	Casing Diameter (inches)	Proposed Annual Volume (Acre-feet)	Estimated Date of New Well Construction	Estimated Time Required To Complete Well

I (We), Chuck Lill, the applicant(s) named in this application, do hereby certify under the penalty of perjury, that the information contained and statements made herein are to the best of my (our) knowledge and belief true, correct and complete.

623 869 2665
Telephone

[Signature]
Signature of owner or authorized agent

Sr. Policy Analyst
Title

23636 N. 7th Street Phoenix AZ 85024
Mailing Address City State Zip

STATE OF ARIZONA)
County of Maricopa) ss.

Subscribed and sworn to before me this 2 day of October, 20 09.

Susan M. Urso
Notary Public

3/14/2010
My commission expires:



CAWCD RECOVERY WELL APPLICATION (10/02/2009)

WELL OWNERS & ADDRESSES

WELL (55-)	NAME	ADDRESS	CITY	STATE	ZIP
621808	Sundance Farms	3227 W. Bechtel Rd	Coolidge	AZ	85228
605354	Bartlett Farms	Rt 1 Box 9	Coolidge	AZ	85228
800214	Marcus Martin	817 Shadow Ridge Rd	Casa Grande	AZ	85228
800215	Marcus Martin	817 Shadow Ridge Rd	Casa Grande	AZ	85228